South Dakota Department of Social Services

Department of Social Services
Office of Licensing and Accreditation
3900 W Technology Circle, Suite 1
Sioux Falls, SD 57106

**Program Name:** South Dakota Urban Indian Health
**Due Date: 3/1/2023**

## Plan of Correction Items for Substance Use Disorder Services

The following administrative rules were found to be out of compliance. In a State accreditation review, Administrative Rule requires a plan by the agency to bring these items into compliance in order for accreditation to be renewed. Failure to provide a plan could result in suspension or revocation of accreditation.

| Administrative POC-1 | |
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| **Rule #: 67:61:05:01** | **Rule Statement: Tuberculin Screening Requirements.** Tuberculin screening requirements for employees are as follows:<br><br>1. Each new staff member, intern, and volunteer shall receive the two-step method of tuberculin skin test or a TB blood assay test to establish a baseline within 14 days of employment. Any two documented tuberculin skin tests completed within a 12 month period before the date of employment can be considered an adequate baseline test. Skin testing or TB blood assay tests are not required if a new staff, intern, or volunteer provides documentation of the last skin testing completed within the prior 12 months. Skin testing or TB blood assay tests are not required if documentation is provided of a previous positive reaction to either test;<br><br>2. A new staff member, intern, or volunteer who provides documentation of a positive reaction to the tuberculin skin test or TB blood assay test shall have a medical evaluation and chest X-ray to determine the presence or absence of the active disease;<br><br>3. Each staff member, intern, and volunteer with a positive reaction to the tuberculin skin test or TB blood assay test shall be evaluated annually by a licensed physician, physician assistant, nurse practitioner, clinical nurse specialist, or a nurse and a record maintained of the presence or absence of symptoms of *Myobacterium tuberculosis*. If this evaluation results in suspicion of active tuberculosis, the licensed physician shall refer to the staff member, intern, or volunteer for further medical evaluation to confirm the presence or absence of tuberculosis; and<br><br>4. Any employee confirmed or suspected to have infectious tuberculosis shall be restricted from employment until a physician determines that the employee is no longer infectious. |
| **Area of Noncompliance:** All reviewed SUD employee files contained the first step of the TB skin test, but were missing the second step of the test. | |
| **Corrective Action (policy/procedure, training, environmental changes, etc):** New hire form SDUIH-HR-7 (attached) was updated in December 2022 to include the two step TB test and all staff were made aware of the change at an All Staff Meeting in January 2023. | **Anticipated Date Achieved/Implemented:**<br><br>**Date** 1/1/2023 |

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| **Supporting Evidence:** See attached form. | **Position Responsible:** HR Manager |
| **How Maintained:** New employee form updated and being used for all new employees. | **Board Notified:** Y ☒ N ☐ n/a ☐ |

| **Administrative POC-2** | |
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| **Rule #: 67:61:05:05** | **Rule Statement: Orientation of Personnel.** The agency shall provide orientation for all staff, including contracted staff providing direct clinical services, interns, and volunteers within ten working days after employment. The orientation must be documented and must include at least the following items.<br><br>1. Fire prevention and safety, including the location of all fire extinguishers in the facility, instruction in the operation and use of each type of fire extinguisher, and an explanation of the fire evacuation plan and agency's smoking policy;<br><br>2. The confidentiality of all information about clients, including a review of the confidentiality of alcohol and drug abuse patient records, 42 CFR Part 2 (June 9, 1987), and the security and privacy of HIPAA, 45 CFR Parts 160 and 164 (April 17, 2003).<br><br>3. The proper maintenance and handling of client case records;<br><br>4. The agency's philosophical approach to treatment and the agency's goals;<br><br>5. The procedures to follow in the event of a medical emergency or a natural disaster;<br><br>6. The specific job descriptions and responsibilities of employees;<br><br>7. The agency's policies and procedure manual maintained in accordance with ARSD 67:61:04:01; and<br><br>8. The agency's procedures regarding the reporting of cases of suspected child abuse or neglect in accordance with SDCL 26-8A-3 and 26-8A-8. |
| **Area of Noncompliance:** All reviewed personnel files had the required components completed in orientation, but none of the files had the orientation items completed within 10 working days. | |
| **Corrective Action (policy/procedure, training, environmental changes, etc):** New BH employees orientation schedule was updated to include the above 8 requirements. Please see the attached completed in processing checklist with these changes implemented and used for our new counselor who started on 1/5/2023 | **Anticipated Date Achieved/Implemented:**<br><br>**Date** 1/1/2023 |
| **Supporting Evidence:** See attached completed employee in processing checklist for most recent BH counselor hired. | **Position Responsible:** HR Manager |

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| **How Maintained:** Orientation schedule updated and currently being used for new employees going forward. | **Board Notified:** Y ☒ N ☐ n/a ☒ |

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| Signature of Agency Director: Michaela Sutter | Date: 2/27/2023 |

Please email or send Plan of Correction to:

Department of Social Services
Office of Licensing and Accreditation
3900 West Technology Circle, Suite 1
Sioux Falls, SD 57106

Email Address: DSSLicAccred@state.sd.us

**The Department of Social Services, Office of Licensing and Accreditation has reviewed and accepted the above plan.**

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| Signature of Licensing Staff: Chris Kruger | Date: 2/28/2023 |